

UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF CALIFORNIA

In re)	Case No. 13-50914 CN
)	
Carlos Serrano Dominguez)	Chapter No. 13
)	
)	
Debtor(s))	Application for Unclaimed Dividends and Certificate of Service
)	

I am applying for funds in the amount of \$ 12,440.61 which have been paid into the court by the trustee in this case for the following creditor.

Name Carlos Serrano Dominguez

Address 375 Blueridge Ct
Soledad CA 93960

Last four digits of SS# or Tax ID# 4464

Please check the appropriate box.

I am the creditor named above.

I hold an ownership interest of _____% in the creditor and my ownership interest is that of _____ (e.g. sole proprietorship, partner, stockholder). I have authority from any and all other parties holding an ownership interest in the creditor to collect funds on behalf of the creditor.

I am an employee of the creditor named above and my title is _____. I am authorized by the creditor to file this application and have attached an authorization to collect on behalf of the creditor because I am not an officer of the company or corporation.

I am the legal representative for the creditor named above. I have attached an original, notarized power of attorney which includes the case number, case name, chapter number, dollar amount of claim and the typed name, title (if applicable), address and phone number of the person who signed the power of attorney. An **original** business card is attached if the claimant is employed by the creditor. Also, an authorization to collect on behalf of the creditor is attached if the claimant is not an officer of the company or corporation.

I am a successor in interest, or its legal representative (legal representatives must attach a power of attorney as described above) and I have attached documentation which establishes my right to make this claim. Please provide a brief history of the creditor named above and attach documents that clearly establish that the unclaimed funds are included in any sale, merger, transfer or acquisition.

I am the heir/legal representative of the creditor who is deceased. I have attached a certified copy of the death certificate and other appropriate documents that support my right to act on behalf of the decedent's estate.

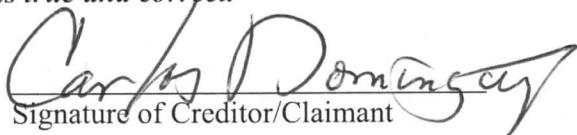
None of the above apply. I have attached documents that show that I am entitled to the unclaimed funds because:

I have no knowledge that any other party may be entitled to these funds and I am not aware of any dispute regarding these funds.

On _____, I mailed a copy of this application to the U.S. Attorney for the Northern District of California, 450 Golden Gate Avenue, P.O. Box 36055, San Francisco, CA 94102.

I understand that pursuant to 18 U.S.C. section 152, I will be fined not more than \$5,000.00, or imprisoned not more than five years, or both if I knowingly and fraudulently made any false statements in this document.

I certify, under the penalty of perjury, under the laws of the United States of America, that the foregoing is true and correct.



Signature of Creditor/Claimant

375 Blueridge Ct
Soledad CA 93960

Address of Creditor/Claimant

Carlos Serrano Dominguez

(831) 678-1896

Typed or Printed Name

Telephone Number of Creditor/Claimant

9/24/14

Carlos.Dominguez@cdcr.ca.gov

E-mail Address of Creditor/Claimant

NOTARY

All attached.

CALIFORNIA JURAT WITH AFFIANT STATEMENT

GOVERNMENT CODE § 8202

- See Attached Document (Notary to cross out lines 1–6 below)
 See Statement Below (Lines 1–6 to be completed only by document signer[s], *not* Notary)

1

2

3

4

5

6

Signature of Document Signer No. 1

Signature of Document Signer No. 2 (if any)

State of California

County of

Monterey

Subscribed and sworn to (or affirmed) before me

on this 24th day of September, 2014.

Date Month Year

by

(1) *Carlos Serrano*,

Name of Signer

proved to me on the basis of satisfactory evidence
to be the person who appeared before me (.) (.)

(and)

(2) _____,

Name of Signer

proved to me on the basis of satisfactory evidence
to be the person who appeared before me.)

Signature

A. C. King

Signature of Notary Public

OPTIONAL

Though the information below is not required by law, it may prove valuable
to persons relying on the document and could prevent fraudulent removal
and reattachment of this form to another document.

Further Description of Any Attached Document

Title or Type of Document: _____

Document Date: _____ Number of Pages: _____

Signer(s) Other Than Named Above: _____

RIGHT THUMPRINT OF SIGNER #1

Top of thumb here

RIGHT THUMPRINT OF SIGNER #2

Top of thumb here